Piloting a Social Screener in the Pediatric Clinic

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Introduction:

With an evolving healthcare system and the introduction of the Affordable Care Act in March 2010, physicians have found it necessary to change their approach to care, with considerations of cost, quality, and access constantly at the forefront of their decision-making. The complexity of today’s healthcare system, as demonstrated in the SELECT Health Systems domain, mirrors the intricate web of biopsychosocial factors that affect patients’ health both acutely and chronically, including determinants such as food insecurity, health literacy, and trauma. For example, a study on health-related quality of life found that children living in food-insecure households report lower general health status and a greater overall negative physical symptoms than do children from food-secure families. To meet patients where they are, as exemplified by the SELECT Values-Based Patient-Centered Care domain, healthcare providers must utilize a comprehensive tool to evaluate patients’ social needs, with the goal of providing better care and resources tailored to these needs.

AIMS:

- Pilot social screener of social determinants of health to establish baseline assessment of needs
- Utilize assessment at LVHN Children’s Clinic at 17th St. to drive improvements in clinical care

Methods:

1. Survey Created by LVHN Colleagues to be Piloted
2. Research Assistants approached families in the Waiting Room to ask them to complete the social needs survey (voluntary and anonymous)
3. Survey Administered and Data Recorded on REDCap.

Total # of Surveys Collected: 372

Results:

- Food Insecurity
  - Ages 14-18: 41.4%
  - Ages 6-13: 58.3%
  - Ages 0-5: 82.5%

- Difficulty Paying Mortgage Rent
  - Ages 14-18: 22.6%
  - Ages 6-13: 37.4%
  - Ages 0-5: 77.4%

- Difficulty Paying Utilities
  - Ages 14-18: 29.6%
  - Ages 6-13: 70.4%
  - Ages 0-5: 78.7%

- Child has Ineffective IEP
  - N = 109
  - Not true: 67.9%
  - Somewhat: 22.6%
  - True: 10.7%

- Children Needing Special Education Services
  - N = 159
  - Not true: 67.9%
  - Somewhat: 22.6%
  - True: 10.7%

- Frequency Reading to Child
  - N = 323
  - Never: 22.6%
  - 1 time a week: 37.4%
  - A few times a week: 14.6%
  - Every day: 35.5%

- Confidence Filling out Medical Forms
  - N = 323
  - Not at all: 37.4%
  - A little bit: 67.9%
  - Somewhat: 14.6%
  - Quite a bit: 22.6%
  - Extremely: 29.6%

- Transportation Barriers

Conclusions:

- Social needs were varied – highest need: food insecurity
- Successful collection of data in limited time frame
- Limitations:
  - Only in English
  - Selection bias
  - Significance:
    - Spanish-speaking Latinos are less likely to receive preventive care than English-speaking Latinos.
  - Time frame of the Study; Length of Survey
- Future Directions:
  - Addition or Elimination of categories of social screener questions; Modifications of existing questions for clarity and for adult screener
- Implications:
  - Incorporate social needs into routine clinical practice
  - Improve physician-patient relationship

Literature cited:


Acknowledgments

We would like to thank the staff in the Children’s Clinic and the Department of Community Health at Lehigh Valley Health Network for their support.
**Food Insecurity**

- Not at Risk: 58.3%
- At Risk: 41.4%

**Difficulty Paying Mortgage/Rent**

- Not at Risk: 77.4%
- At Risk: 22.6%

**TRANSPORTATION BARRIERS**

- Sometimes
- Often
- Always

**TRANSPORTATION BARRIERS FOR FOOD OR GROCERIES**

- Not true: 8.9%
- Somewhat: 8.6%
- True: 11.3%

**TRANSPORTATION BARRIERS FOR VISITING FRIENDS OR FAMILY**

- Not true: 8.9%
- Somewhat: 8.6%
- True: 11.3%

**TRANSPORTATION BARRIERS TO MEDICAL APPOINTMENTS**

- Not true: 8.9%
- Somewhat: 8.6%
- True: 11.3%

**Child has Ineffective IEP**

- Not true: 67.9%
- Somewhat: 19.3%
- True: 12.8%

**Children Needing Special Education Services**

- Not true: 76.1%
- Somewhat: 10.7%
- True: 13.2%

N = 159

N = 109